PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032

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Fees parsault to the Consolidated Appropriations Act, 2005 (H.R. 4818). Complete if Known 10/632,343 **Application Number** FEE TRANSMITTAI Filing Date August 1, 2003 For FY 2008 First Named Inventor John B. Letts **Examiner Name** John M. Cooney Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1711 TOTAL AMOUNT OF PAYMENT 1.460.00 Attorney Docket No. P02030US2A(336) METHOD OF PAYMENT (check all that apply) Credit Card Check Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 06-0925 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Credit any overpayments Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** FILING FEES SEARCH FEES **Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 255 210 105 130 210 105 100 65 Design 50 160 Plant 210 310 105 155 80 Reissue 310 155 510 620 310 255 Provisional 210 105 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 25 50 Each claim over 20 (including Reissues) 210 105 Each independent claim over 3 (including Reissues) 370 185 Multiple dependent claims Multiple Dependent Claims Fee Paid (\$) **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) - 20 or HP = 1.000.00 Fee (\$) 50 20_ X HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Extra Claims Fee (\$) 3 - 3 or HP = ____× 210 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 460.00 Other (e.g., late filing surcharge): Two-Month Extension of Time

SUBMITTED BY / \ / \ /		
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of Group Art Unit 1711 JOHN B. LETTS, WAYNE E. LAUGHLIN, and John Cooney, Examiner **BRUCE M. MILLER Certificate of Mailing** I hereby certify that this correspondence was deposited Serial No. 10/632,343 with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria VA Filed August 1, 2003 22313-1450 on December 10, 2007 For INSULATION BOARDS AND METHODS FOR THEIR **MANUFACTURE**

TRANSMITTAL SHEET

Enclosed are the following documents:

Response and Amendment
Two-Month Extension of Time
Return Receipt Postcard
Fee Calculation Sheet

AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 06-0925.

Respectfully submitted,

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